



State of New Hampshire 2015 ANNUAL REPORT

The following information shall be given as of January 1
preceeding the due date Pursuant to RSA 293-A:16.22.

REPORT DUE BY April 1, 2015

ANNUAL REPORTS RECEIVED AFTER THE DUE DATE
WILL BE ASSESSED A LATE FEE.

Filed

Date Filed: 03/10/2015

Business ID: 6518

William M. Gardner

Secretary of State

BEACH SHOPPES, INC.

186 OCEAN BLVD

SEABROOK, NH 03874

ADDRESS OF PRINCIPAL OFFICE:

186 OCEAN BLVD

SEABROOK, NH 03874

REGISTERED AGENT AND OFFICE:

CASASSA, ROBERT A, ESQ

CASASSA & RYAN, 459 LAFAYETTE ROAD

HAMPTON, NH 03842

ENTITY TYPE: CORPORATION

BUSINESS ID: 6518

STATE OF DOMICILE: NEW HAMPSHIRE

TO ESTABLISH AND CONDUCT THE OPERATION OF A REAL ESTATE
BUSINESS. ('99 AR)

If changing the mailing or principal office address, please check the appropriate box and fill in the necessary information.

☐

The new mailing address

☐

The new principal office address

PO Box is acceptable.

OFFICERS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).

(MUST LIST AT LEAST ONE OFFICER BELOW)

PRES. Robert F Preston

STREET 186 Ocean Blvd

CITY/STATE/ZIP Seabrook Beach Nh 03874

TREAS. Charlotte K Preston

STREET 186 Ocean Blvd

CITY/STATE/ZIP Seabrook Beach Nh 03874

V-PRES. Robert R Preston

STREET 186 Ocean Blvd

CITY/STATE/ZIP Seabrook Beach Nh 03874

SEC'Y. Robert R Preston

STREET 186 Ocean Blvd

CITY/STATE/ZIP Seabrook Beach Nh 03874

NAMES AND ADDRESSES OF ADDITIONAL OFFICERS AND DIRECTORS ARE ATTACHED

BOARD OF DIRECTORS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).

(MUST LIST AT LEAST ONE DIRECTOR BELOW)

DIR. Robert F Preston

STREET 186 Ocean Blvd

CITY/STATE/ZIP Seabrook Beach Nh 03874

DIR. Charlotte K Preston

STREET 186 Ocean Blvd

CITY/STATE/ZIP Seabrook Beach Nh 03874

DIR. Robert R Preston

STREET 186 Ocean Blvd

CITY/STATE/ZIP Seabrook Beach Nh 03874

NAME

STREET

CITY/STATE/ZIP

To be signed by an officer, director, or any other person authorized by the board of directors.

I, the undersigned, do hereby certify that the statements on this report are true to the best of my information, knowledge and belief.

Sign here:

Robert R Preston

Please print name and title of signer:

Robert R Preston

/

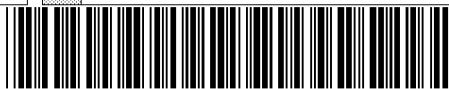
DIRECTOR

NAME

TITLE

FEE DUE: \$100.00

E-MAIL ADDRESS (OPTIONAL):



651820151009

WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A
PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE
REQUIRED INFORMATION MUST BE COMPLETE OR THE REGISTRATION REPORT WILL BE REJECTED

MAKE CHECK PAYABLE TO SECRETARY OF STATE

RETURN COMPLETED REPORT AND PAYMENT TO:

New Hampshire Department of State, Annual Reports, 107 N. Main St., Room 204, Concord, NH 03301